SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES

PRIMARY AND GENERAL ELECTIONS	State of N
LONNIE PULLMAN WCSD Truske	D
didate's Name(print) Office	District (if applicable,
755 Circle Dr Reno NV 89509	7866432
ling Address (include city and zip code)	Telephone Number
DEDODE MUMBER 2 DUE OCTOBER	21 2000
REPORT NUMBER 2 - DUE OCTOBER Report Period Begins: August 24, 2000	<i>51, 2000</i>
Report Period Ends: October 25, 2000	**************************************
	•
CONTRIBUTIONS SUMMARY	<u> </u>
1. From Report Number 1, total amount of contributions in excess of \$100	± 450
2. From Report Number 1, total amount of contributions of \$100 or less	455
3. Report Number 2, amount of contributions in excess of \$100	0
4. Report Number 2, total amount of contributions of \$100 or less	125
From Report Numbers 1 and 2, actual number of	
contributions of \$100 or less	
5. Interest and income earned, if any, during this report period	1.24
6. TOTAL AMOUNT OF ALL CONTRIBUTIONS	
(add lines 1 through 5)	1031.24
EXPENSES SUMMARY	
7. From Report Number 1, total amount of expenses in excess of \$100	
8. From Report Number 1, total amount of expenses of \$100 or less	\$140
9. Report Number 2, total amount of expenses in excess of \$100	Ø
10. Report Number 2, total amount of expenses of \$100 or less	
11. TOTAL AMOUNT OF ALL EXPENSES	
(add lines 7 through 10)	#140-
ontributions or expenses are listed during this Report Period, only this page of ling officer.	f the report needs to be file
I declare under penalty of perjury that the foregoing is true and correct.	
Executed on 10/2/20 June Fullma	
Date // Signature of Candidate	

EL201.002(rev 04/00)

Total number of pages for this report $\underline{\hspace{1cm}}$

SONNIE PULLMAN	WCSD Trustee	\mathcal{D}
Candidate's Name (print)	Office	District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	©HECK√ IF LOAN	CHECK V IF IN KIND
		-		

JONNIE PUUMAN Candidate's Name (print)

Office

District (if applicable)

Contributions of \$100 or Less

DATE OFEACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
8/25	A50		
9/3D	#25		
10/2	\$50		

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Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	В	
Expenses related to travel	С	
Expenses related to advertising	D	
Expenses related to paid staff	E	``
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	Н	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	

PAGE OF

Candidate's Name (print)	Office	District (if applicable)	
SONNIE PULLMAN	WESD TRUSTEE	\triangleright	

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE

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JONNIE PULLMAN	WCSD Trustee	\triangleright
Candidate's Name (print)	Office	District (if applicable)

Expenses of \$100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY		DATE GFEACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
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